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2633

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: T. Allan Hamilton et al.

Title: Improved Signal Receiver Having Wide Band Amplification Capability

Application No.: 09/212,203

Filing Date: December 15, 1998

Examiner: Phan, Hanh

Group Art Unit: 2633

Docket No.: ZILG.257US0
(formerly CLB7-B93)

Conf. No.: 8736

RECEIVED

DEC 14 2004

Technology Center 2600

Certificate of Mailing Under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on December 7, 2004

Mary E. Buggin
Signature

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO FINAL OFFICE ACTION AND AMENDMENT

Sir:

This is in response to the final Office Action dated September 8, 2004.

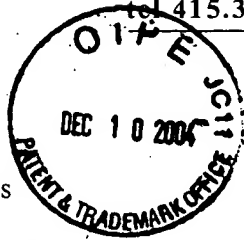
Claim Amendments are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.

Attorney Docket No.: ZILG.257US0

Application No.: 09/212,203

December 7, 2004

Mail Stop Amendment
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450
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 Technology Center 2600

Re: Applicants: T. Allan Hamilton et al.
 Title: Improved Signal Receiver Having Wide Band Amplification Capability
 Application No.: 09/212,203 Filing Date: December 15, 1998
 Examiner: Phan, Hanh Group Art Unit: 2633
 Docket No.: ZILG.257US0 Conf. No.: 8736

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Return Receipt Postcard;
- (2) This Transmittal Letter (in duplicate);
- (3) Response to Final Office Action and Amendment (5 pages);
- (4) Submission of Formal Drawings (1 page); and
- (5) Ten (10) sheets of formal drawings.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining <i>After</i> <u>Amendment</u>		Highest No. Previously <u>Paid For</u>		Present <u>Extra</u>	<u>Rate</u>	Additional <u>Fee</u>
Total Claims	8	Minus	20	=	0	x \$18.00	\$ 0.00
Independent Claims	2	Minus	5	=	0	x \$88.00	\$ 0.00
<input type="checkbox"/>	Fee of _____ for the first filing of one or more multiple dependent claims per application						\$

Total additional fee for this Amendment: \$ 0.00

- ☒ Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.
- ☒ Please charge any additional fees required and credit any overpayment to our Deposit Account No. 502664.

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Mary E. Buggi
 Signature

Respectfully submitted,

Gerald P. Parsons
 Reg. No. 24,486